



PART B - FEE(S) TRANSMITTAL

10-06-06

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[EV 904369484 US]  
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|                              |                    |
|------------------------------|--------------------|
| Deborah A. Kocorowski        | (Depositor's name) |
| <i>Deborah A. Kocorowski</i> | (Signature)        |
| October 5, 2006              | (Date)             |

26371 7590 07/10/2006

FOLEY & LARDNER LLP  
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MILWAUKEE, WI 53202-5306

10/10/2006 WASFA#2 00000058 10706213

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/706,213      | 11/12/2003  | Reggie Davis         | 089339-0386         | 6327             |

TITLE OF INVENTION: BASEPAN ASSEMBLY

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO           | \$1400        | \$300               | \$0                  | \$1700           | 10/10/2006 |

| EXAMINER                | ART UNIT | CLASS-SUBCLASS |
|-------------------------|----------|----------------|
| HOFFBERG, ROBERT JOSEPH | 2835     | 361-644000     |

|   |   |  |
|---|---|--|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).<br><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.<br><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | 2. For printing on the patent front page, list<br>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,<br>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | 1 <u>Foley &amp; Lardner LLP</u><br>2 _____<br>3 _____ |
|---|---|--|

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

|   |   |
|---|---|
| (A) NAME OF ASSIGNEE<br>Siemens Energy & Automation, Inc. | (B) RESIDENCE: (CITY and STATE OR COUNTRY)<br>Alpharetta, Georgia |
|---|---|

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

|  |   |
|--|---|
| 4a. The following fee(s) are submitted:<br><input checked="" type="checkbox"/> Issue Fee<br><input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted)<br><input type="checkbox"/> Advance Order - # of Copies _____ | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)<br><input type="checkbox"/> A check is enclosed.<br><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><input type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number <u>06-1447</u> (enclose an extra copy of this form). |
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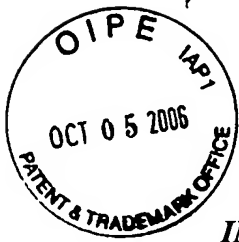
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *James A. Wilke* Date 10-05-06  
Typed or printed name James A. Wilke Registration No. 34,279

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

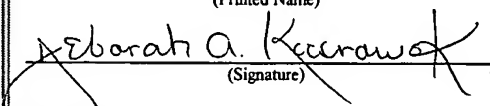
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Attorney Docket No. 089339-0386

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Davis et al.  
Title: BASEPAN ASSEMBLY  
Application No.: 10/706,213  
Filing Date: 11/12/2003  
Examiner: Hoffberg, Robert Joseph  
Art Unit: 2835  
Confirmation No.: 6327

|   |                                      |
|---|--------------------------------------|
| <b>CERTIFICATE OF EXPRESS MAILING</b><br>I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. |                                      |
| EV 904369484 US<br>(Express Mail Label Number)  | October 5, 2006<br>(Date of Deposit) |
| Deborah A. Kocorowski<br>(Printed Name)   |                                      |
| <br>(Signature)   |                                      |

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**TRANSMITTAL**

Transmitted herewith please find the following documents for the above-identified patent application.

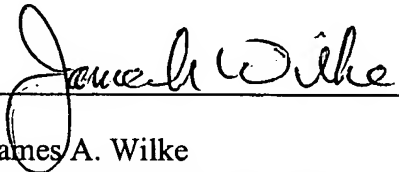
- ☒ [ X ] Issue Fee Transmittal (2 pages).
- ☒ [ X ] Issue Fee Transmittal Form PTOL-85(B) (1 page).
- ☒ [ X ] Credit Card Payment Form for \$1,700.00 (1 page).

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Respectfully submitted,

Date 10-05-06

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By   
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